



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF WASTE MANAGEMENT
Highland Building
121 South Highland Avenue
Pittsburgh, Pennsylvania 15206-3988
(412) 645-7100 (answers 24 hrs.)

5
SQG

August 18, 1988

NOTICE OF VIOLATION

RECEIVED

AUG 23 1988

CERTIFIED MAIL #P 536 374 165

Mr. John Scherier, Owner
Scherier Machine Company
3200 Industrial Boulevard
P.O. Box 670
Bethel Park, PA 15102

Waste Management Branch
EPA - Region III

RE: August 9, 1988 Inspection
Scherier Machine Company
PAD981941123
Bethel Park Borough
Allegheny County

RECEIVED
AUG 30 1988

Dear Mr. Scherier:

This Notice of Violation is to confirm the findings of the Department's referenced inspection of your hazardous waste generator activities. Requirements for hazardous waste facilities are contained in Chapters 75.260 through 75.450 of the Rules and Regulations of the Department. Violations of applicable sections of these regulations found during the inspection are as follows:

1. Manifests for shipments of hazardous waste were not located on-site, in violation of 25 Pa. Code §75.262(h).
2. Quarterly reports are not being filed with the Department in violation of 25 Pa. Code §75.262(i).

You are hereby notified of both the existence of these violations as well as the need to provide for their prompt correction. Towards this end, you are to submit to the Department by September 15, 1988 a proposed program and schedule in abatement of these violations. If your proposed abatement program indicates certain corrections cannot be completed within these time periods, you are requested to supply justification for any extensions.

This Notice of Violation does not waive, either expressly or by implication, the power or authority of the Commonwealth of Pennsylvania to prosecute for any and all violations of law arising prior to or after the issuance of this

Mr. John Scherier

-2-

August 18, 1988

Notice of Violation or the conditions upon which the Notice of Violation is based. This Notice of Violation shall not be construed so as to waive or impair any rights of the Department of Environmental Resources heretofore or hereafter existing.

This Notice of Violation shall also not be construed as a final action of the Department of Environmental Resources.

If you have any questions concerning this Notice of Violation, please feel free to contact me at my office.

Sincerely,

David Waldorf
Solid Waste Specialist

DW/kld

cc: Division of Compliance and Monitoring/Central
EPA
Regional File
Chron File
David Waldorf
Barb Gunter
Kathy Watson

ID — For Official Use Only														
C													T/A	C
W														1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary:

1	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary:

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary:

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary:


49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

<input checked="" type="checkbox"/> 1. Ignitable (D001)	<input type="checkbox"/> 2. Corrosive (D002)	<input type="checkbox"/> 3. Reactive (D003)	<input type="checkbox"/> 4. Toxic (D009)
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XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) DAVID R. KNIGHT ENGINEER	Date Signed 9-12-88
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Hazardous Waste Inspection Report
Generators - Part AScherier mach

Date of inspection 8/9/88 Time start 9:30 AM Time finish 10:25 AM
 Name of inspector David Wildorf
 Company, installation name Scherier Machine Co.
 Location 3200 Industrial Blvd.
 County Allegheny Municipality Bethel Park Boro.
 Identification number PA0 981941123
 Name of responsible official John Scherier
 Title Owner
 Mailing address 3200 Industrial Blvd, P.O. Box 670, Bethel Park, PA 15102
 Area code and telephone number (412) 833-6500
 Name of person interviewed David Knight
 Title Manufacturing Engineer
 Mailing address (if different from above) - Same -
 Area code and telephone number - Same -

1. Current waste handling method:

- | | | | | | |
|----|--|-------------------------------------|-----------------------------------|--|----------------------------------|
| a. | <input type="checkbox"/> On-site | <input type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input type="checkbox"/> Off-site | <input type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input type="checkbox"/> disposal | |
| d. | <input checked="" type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input checked="" type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

- a. 183 kg./mo. (6-7/88)
 b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

D0014. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

RRRA COMPLIANCE SECTION
 RECEIVED
 AUG 31 1988

Cecil Office

Hazardous Waste Inspection Report
Generators - Part BScherein Machine Co
PAD 98194/123
8/9/88

1—No Violation Observed				2—Not Applicable	3—Not Determined	4—Non-Compliance
Status				REQUIREMENT		Chapter Citation
1	2	3	4			75.262
1				Hazardous waste determination, copies available		(b)
1				Identification number		(c)(1)
1				Hazardous waste shipments offered only to licensed transporters		(c)(4)
1				Authorization received from TSD facility for wastes shipped off-site		(d)
1				PA manifest used for intrastate shipments		(e)(2)
	2			Disposer state manifest or EPA format manifest used for out-of-state shipments		(e)(3)
1				Manifests filled out properly and completely		(e)(7)
1				Manifests routed properly and within time limits (7 days)		(e)(14) or (15)
		3		Proper U.S. DOT shipping containers or packages		(f)(1)(i)
		3		Shipping containers marked and labeled according to U.S. DOT		(f)(1)(ii)
		3		Containers of 110 gal. or less marked with required PA label		(f)(1)(iii)
		3		Placards offered to transporter		(f)(2)
1				Wastes accumulated on-site for less than 90 days		(g)(1)(i)
		3		Wastes stored in proper containers and properly marked and labeled		(g)(1)(ii)
		3		Containers managed in accordance with 75.265(q)(1)–(9)		(g)(1)(iii)
		3		Containers clearly marked with accumulation date and visible for inspection		(g)(1)(iv)
			4	Records retained at designated location for 20 years		(h)
			4	Quarterly reports submitted to the Department		(i)
	2			Exception reporting procedures followed		(j)
	2			Hazardous waste disposal plan, if required		(l)
	2			Spill reporting procedures followed		(m)(1)
		3		Preparedness, Prevention and Contingency Plan and implemented		(m)(5)
	2			Special requirements followed for international shipments		(o)
		3		On the job or classroom personnel training program (75.265(f))		(g)(1)(6)
		3		Drum accumulation area inspected weekly as per 75.265(q)(5)		(g)(1)(iii)

Hazardous Waste Inspection Report
Comments - Part C

Page 1 of 2

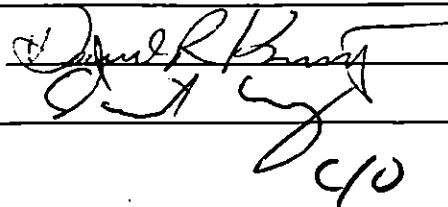
Date of Inspection 8/9/88 Identification Number PAD 981941123
Company, Installation Name Scherier Machine Co
County Allegheny Municipality Bethel Park Boro

In the "Requirement" Section of this inspection report, each listed inspection item may provide only a brief version of its corresponding obligation as described in the body of the regulations. Please use the Chapter citations listed on this inspection report as a reference to obtain a detailed description of compliance requirements.

- ① Mr. Knight advises that this facility is a contract machine shop, and that hazardous wastes generated on site are limited to used waste petroleum products handled by Safety-Kleen Corp. of Clairton, PA. A visual inspection of the site revealed the presence of three (3) parts washers containing solvent.
- ② Visually inspected the hazardous waste records on site. Noted the following violations:
 - a.) Most of the manifests for hazardous wastes generated at this facility were not located on site, in violation of Elyette 75.262 (b). Mr. Knight advises that these documents are in the possession of Three Rivers Health and Safety Co., who is compiling them in a book for the facility.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature)



Date

8-9-88

Inspector (signature)


40

Date

8/9/88

Hazardous Waste Inspection Report
Comments - Part C

Page 2 of 2

Date of Inspection 8/9/88 Identification Number DAD 981941123
Company, Installation Name Scherer Machine Co
County Allegheny Municipality Bethel Park Boro

②

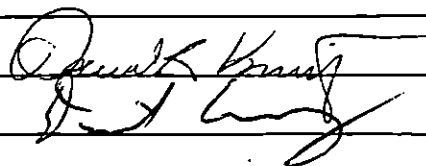
b.) Quarterly reports are not being filed with the Department, in violation of Chapter 75.262 (i). Mr. Knight was provided with copies of this form.

③

The generation rate, as calculated from records for June + July, 1988 for this facility was 183 Kg/mo. If this is a true reflection of the facility's generation rate, it may re-notify EPA and the Department as a small quantity generator. Notification forms will be supplied with this inspection for this purpose.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

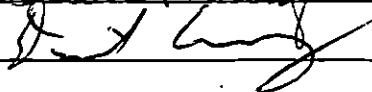
Person Interviewed (signature)



Date

8-9-88

Inspector (signature)



Date

8/9/88



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER



+

PAD981941123

INSTALLATION ADDRESS



SCHERIER MACH
3200 INDUSTRIAL BLVD BOX 670
BETHEL PARK PA 15102
ATTN: JACKSON, RANDY MGR

3200 INDUSTRIAL BLVD
BETHEL PARK PA 15102



EPA Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

Comments

[illegible]

Installation's EPA ID Number										Approved:			Date Received (yr. mo. day)			Allegheny 003							
C F	P	A	D	9	8	1	9	4	1	1	2	3	T/A	C					8	7	0	7	0

[illegible]

Street or P.O. Box

[illegible][illegible]

Street or Route Number

C	S A M E																								
5																									

City or Town		State		ZIP Code	
C	S A M E				

Name and Title (last, first, and job title)

P	J	A	C	K	S	O	N		R	A	N	D	Y	M	G	R		4	1	2	8	3	3	6	5	0	0
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A. Name of Installation's Legal Owner.

[illegible]

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
<input checked="" type="checkbox"/> 1a. Generator	<input type="checkbox"/> 1b. Less than 1,000 kg/mo.	<input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter "X" and mark appropriate boxes below)	<div style="text-align: center;"> RECEIVED PA SECTION JUN 30 1967 EPA, R3 </div>
<input type="checkbox"/> 2. Transporter		<input type="checkbox"/> a. Generator Marketing to Burner	
<input type="checkbox"/> 3. Treater/Storer/Disposer		<input type="checkbox"/> b. Other Marketer	
<input type="checkbox"/> 4. Underground Injection		<input type="checkbox"/> c. Burner	
<input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter "X" and mark appropriate boxes below)		<input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (for On site Burner) Who First Claims the Oil Meets the Specification	
<input type="checkbox"/> a. Generator Marketing to Burner			
<input type="checkbox"/> b. Other Marketer			
<input type="checkbox"/> c. Burner			

VII. Waste Fuel Burning: Type of Combustion Device (enter "X" in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace**VIII. Mode of Transportation** (transporters only — enter 'X' in the appropriate box(es))☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify) _____

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

<input checked="" type="checkbox"/> A. First Notification	<input type="checkbox"/> B. Subsequent Notification (<i>complete item C</i>)	<table border="1" style="width: 100%; border-collapse: collapse; height: 40px;"> <thead> <tr> <th colspan="10" style="text-align: center; padding: 2px;">C. Installation's EPA ID Number</th> </tr> </thead> <tbody> <tr> <td style="height: 25px;"></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </tbody> </table>	C. Installation's EPA ID Number																			
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ID — For Official Use Only										
C										T/A C
W										1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

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7	8	9	10	11	12

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E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature <i>Randy Jackson</i>	Name and Official Title (type or print) Randy Jackson Mgr.	Date Signed 4/26
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RECEIVED
PA SECTION

JUN 30 1987

EPA, R3